

Success story: Tracking HIV spending to build financial sustainability in St. Kitts and Nevis

The Country's First-Ever National Health Accounts and HIV Subaccounts Estimation Supports Ownership and Sustainability in HIV Programming

In his opening remarks for the **National Health Accounts (NHA) and HIV Subaccounts Workshop** in September 2013, St. Kitts and Nevis Permanent Secretary for Health Andrew Skerritt announced the first successful completion of this internationally-standardized health expenditure tracking exercise in his country. Mr. Skerritt reminded his listeners that over a decade ago the Government of St. Kitts and Nevis had recognized the value of NHA for monitoring and strengthening the country's health sector initiatives, and noted that the Ministry of Health was proud to make this dream a reality. He highlighted the important role NHA data can now play in efforts to improve the financial sustainability of the health sector overall and HIV programming in particular.

With funding from USAID, the Health Systems 20/20 Caribbean project (led by Abt Associates in partnership with the Centre for Health Economics of the University of the West Indies) provided technical assistance for this first round of NHA and HIV Subaccounts. NHA is a health expenditure tracking methodology that helps inform better health planning and resource allocation, by providing comprehensive data on the amounts, funding sources, management, and uses of expenditures on health and on HIV. Health Systems 20/20 Caribbean systematically compiled health and HIV spending data from public and private institutions, including the Ministry of Health, international donors, NGOs, private insurance companies, and employers. The team also conducted a representative national health expenditure and utilization survey, as well as a survey of people living with HIV. Synthesizing these data into clear, easy-to-understand tables and graphs for use by key HIV and health stakeholders was the key output of this work.

The analysis highlighted strengths and weaknesses in St. Kitts and Nevis's health financing system, and will support evidence-based planning and budgeting as well as efforts to achieve Universal Health Coverage. For instance, the country funds most of its own HIV treatment efforts – but a future funding gap for prevention services may be created by the expected decrease in donor funding. Prevention programs run by NGOs constitute the bulk of donor spending, and the Government of St. Kitts and Nevis will need to identify resource mobilization strategies to ensure that these programs continue. The NHA also showed that the country relies heavily on out-of-pocket spending to fund health care, which is not sustainable or equitable, but PLHIV are thus far largely protected from burdensome health care costs.

Officials in Ministry of Health and National AIDS Programme indicate that they intend to make resource tracking with NHA a routine part of government operations. In addition, with the training and experience gained through this project, the Centre for Health Economics is now poised to take a lead role in providing future NHA technical assistance in St. Kitts and Nevis and other Caribbean countries.



Figure 1: Roxanne Brizan-St. Martin of the Centre for Health Economics, University of the West Indies, presents findings of the NHA and HIV Subaccounts. September 24, 2013